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PATENT
B. Webb
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):)	Title: Test Kit for Tuberculosis
)	Diagnosis by Determining Alanine
Flohé <i>et al.</i>)	Dehydrogenase
)	
Serial No.: 09/362,485)	Group Art Unit: 1655
)	
Filed: July 28, 1999)	Examiner: Diana Johannsen
)	

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)


Commissioner for Patents
Washington, D.C. 20231

Sir:

Applicants hereby petition pursuant to 37 CFR 1.136(a) for a two month extension of time. Also transmitted herewith is a Request for Continued Examination (RCE) and a check in the amount of \$355.00 for the mentioned RCE and a check in the amount of \$195.00 for the above-petition.

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this Petition for Extension of Time Under 37 CFR 1.136(a) and the documents referred to as enclosed therewith are being deposited with the United States Postal Service on **July 27, 2001**, in an envelope addressed to the Commissioner for Patents, Washington, D.C. 20231 utilizing the "Express Mail Post Office to Addressee" service of the United States Postal Service under Mailing Label No. EL 564 460 547 US.


Richard Zimmermann

1. **Small Entity Status**

- ☐ Verified statement(s) claiming small entity status is(are) attached.
- ☒ Small entity status has been established and is still effective.
- ☐ Has not been established.

2. **Extension of Time**

- ☒ This is a petition for an extension of time under 37 CFR 1.136 for the total number of months checked below:

EXTENSION (Months)	FEE FOR LARGE ENTITY		FEE FOR SMALL ENTITY	
One Month		\$110.00		\$55.00
Two Months		\$390.00	X	\$195.00
Three Months		\$890.00		\$445.00
Four Months		\$1,390.00		\$695.00
Five Months		\$1,890.00		\$945.00

If an additional Extension of Time is required, please consider this a petition therefor.

Extension Fee: \$195.00

- ☐ An extension for _____ month(s) has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Deduction: \$

Extension Fee Due With This Request: \$195.00

3. **Method of Payment of Fees**

- ☒ Attached is a check in the amount of \$195.00
- ☐ Charge Deposit Account No. 13-2855
in the amount of: \$ _____
A copy of this Petition is enclosed.

4. Deposit Account and Refund Authorization

The Commissioner is hereby authorized to charge any deficiency in the amount enclosed or any additional fees which may be required during the pendency of this application under 37 CFR 1.16 or 37 CFR 1.17 to Deposit Account No. 13-2855. A copy of this Petition is enclosed.

Please refund any overpayment to Marshall, Gerstein & Borun at the address below.

Respectfully submitted,

MARSHALL, GERSTEIN & BORUN
6300 Sears Tower
233 South Wacker Drive
Chicago, Illinois 60606-6402
(312) 474-6300

By:


Nabeela R. McMillan
Reg. No: 43,363

July 27, 2001